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Bib Data Sheet

SERIAL NUMBER 09/923,891	FILING DATE 08/07/2001 RULE	CLASS 623	GROUP ART UNIT 3732	ATTORNEY DOCKET NO. 46739/262602
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APPLICANTS

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** CONTINUING DATA *****

This application is a CIP of 09/783,860 02/13/2001 ABN
 and is a CIP of 09/783,910 02/13/2001 ABN
 which claims benefit of 60/223,863 08/08/2000
 and claims benefit of 60/265,218 01/31/2001

yes *PA.*

** FOREIGN APPLICATIONS *****

none *PA.*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 09/11/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	Examiner's Signature <i>PA.</i> Initials	WA	82	338	54

ADDRESS

27683

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75202

TITLE

Method and apparatus for stereotactic implantation

<p>FILING FEE RECEIVED 5328</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr><tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr><tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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